COMBINED DECLARATION AND POWER OF ATTORNEY	ATTORNEY DOCKET NO

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Microcansules	harring	nolyman	wolle

the specification of which is attached hereto.

or	was fil	ed on					as					
ΑŢ	plicatio	n Ser	ial No									
1	hereby	state	that	I have	reviewed	and	understand	the	contents	of	the	above

- identified specification, including the claims.

 I acknowledge the duty to disclose information which is material to the patent-
- I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, \$1.56.
- I hereby claim foreign priority benefits under Title 35, United States Code, \$119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s), the priority(ies) of which is/are to be claimed:

10051194.5 (Number) Germany (Country) October 16, 2000 (Month/Day/Year Filed)

I hereby claim the benefit under Title 35, United States Code, \$120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, \$112, I acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, \$1.56 which occurred between the filling date of the prior application and the national or PCT international filling date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status)
		(natented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY as a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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